

GOVERNMENT OF ANDHRA PRADESH
ABSTRACT

NRHM - Identification of Nodal officers for implementation of Management Information System Officers for Strengthening of MIS at State, District, Cluster, PHC and Sub-Centre level – Orders – Issued.

HEALTH MEDICAL AND FAMILY WELFARE (D2) DEPARTMENT

G.O.Rt.No. 1461

Dated.19.08.2011.

Read the following:

From Mission Director (NRHM), Lr.No.Rc.No.263 /CH&FW/
D& E- 5/2010, dt.18.03.2011.

ORDER:

In the letter read above the Mission Director, NRHM has stated that the Core Committee Meeting was held under the Chairmanship of Dr.A.Raja Prasanna Kumar, Additional Director (MCH) O/o CH&FW, A.P., Hyd on 5-2-2011 and discussed on identification of Nodal Officers at State, District, Cluster, PHC and Sub-Centre level for Strengthening Management Information System (MIS) as desired by MOH&FW, GOI, New Delhi. He has requested the Government to approve the minutes of the meeting held on 5.2.2011.

2. Government after careful examination of the matter, hereby approve the minutes of the meeting held 5.2.2011 to identify Nodal MIS officer at State, District, cluster, PHC and at sub center level. Accordingly, government hereby identify the following MIS Nodal officers along with guidelines at State, District, Cluster, PHC and Sub-Centre level for Strengthening Management Information System.

3. **MIS Nodal Officer at the State Level:** Deputy Director Demography will act as Nodal MIS Officers at State level. State Data Manager working at SPMU to give technical guidance in data compilation analysis, reporting and preparation of graphs etc. Nodal Officer will get all reports from other reporting units of the departments like (NVBDCP, IDSP, RNTCP, NLEP, NACP, NPCB, APVVP, DME, AYUSH, Drug Control Authority APHMIDC, IPM, IIH&FW) compile, consolidate and present before Joint Director (M&E) for verification and analysis and then up load the information in HMIS portal.

4. Nodal MIS Officer as convener will conduct monthly meetings with all reporting units under the guidance of JD (M&E). Nodal MIS Officer will prepare Monthly Progress Reports under different health programs and circulate to concern HODs/JDs for their assessment and for follow up action, including reporting on other special and innovative schemes. All JDs will verify 10% of the scheme wise data in the field, and will be discussed in the regular monthly meetings.

5. Monthly meetings have to be conducted with the following reporting officers:

- i. Additional Director (PPM) will preside over the meeting
- ii. Joint Director (M&E)
- iii. Deputy Director (Demography) -State MIS Nodal Officer

- iv. Deputy Director (Vital Statistics)
- v. State Data Manager
- vi. MIS Officer NVBDCP
- vii. Deputy Director, APSACS
- viii. Statistical Officer, APVVP
- ix. Deputy Statistical Officer Epidemics
- x. Deputy Statistical Officer (NPCB)
- xi. Deputy Statistical Officer (DME)
- xii. M&E Officer, AYUSH
- xiii. M&E Officer, Medical Insurance
- xiv. M&E Officer, Drug Control Authority
- xv. M&E Officer, IPM Department and
- xvi. One Statistical Officer/Deputy Statistical Officer/Assistant Statistical Officer(to be identified) representing each Joint Director has to attend with all information with regard to that wing.

6. MIS Nodal Officer at the District Level: Statistical Officer (Family Welfare) will act as MIS Nodal Officer at the state level. He will be supported by all other SOs DYSOs, ASOs, and MIS persons in other wings of the department. In case SO (FW) post is vacant, SO (UIP) will act as nodal MIS officer. If both SOs are not available DM&HO can nominate Dy.SO or ASO as nodal MIS officer and it has to be intimated to the state nodal officer along with their details and reasons for nomination along with phone numbers.

7. District Nodal MIS officer will get all reports from other reporting units (NVBDCP, IDSP, RNTCP, NLEP, NACP, NPCB, APVVP, DME, AYUSH, Drug Control dept), APVVP & DME and compile, consolidate and present before DPMO DCHS and DM&HO for discussion and then up load the information in HMIS portal. Concerned administrators of DME, AYUSH and APVVP and HODs of all the other departments under Commissioner of H&FW shall instruct their HMIS officers/ sections to submit reports to the above mentioned report collecting authorities.

8. District MIS Nodal Officer as convener will convene monthly meetings with all these departments under the guidance of DPMO and prepare data/ trends and it will be circulated to all Program Officers and DM&HO for review and follow up action. Reporting on special and innovative activities to be conducted during the month will also be intimated to all departments in this report. Private hospitals report will also be collected for compilation. Hospitals with <30 beds can use PHC reporting format and Hospitals with >30 beds can use HMIS report used for CHCs.

9. District MIS Nodal officer will work under the guidance of DPMO and will be supported by the following team and a monthly meeting has to be conducted every month for collection and compilation of data

- i. DM&HO will preside over the meeting
- ii. Addl. DM&HO
- iii. Program Officers (all Programs including DMO)
- iv. DPMO

- v. Statistical Officer(FW)—Nodal Officer
- v. Statistical Officer (UIP)
- vi. DEMO
- vii. DPHNO
- viii. DPO (NRHM)
- ix. IDSP Data Manager
- x. MIS assistant NRHM
- xi. DySOs/ASOs/LD Computers in DM&HO office
- xii. DySO NLEP
- xiii. DEO RNTCP
- xiv. DPM (NACP) &MIS Asst.
- xv. DPM (NVBDPCP) &MIS Asst.
- xvi. DEO NPCB
- xvii. DPHNO- at PODTT
- xviii. SOs at Regional Training centers
- xix. DEO/Data Manager at DCHS Office
- xx. DEO/Data Manager at DME Hospitals
- xxi. Lecturers in Statistics and Demography in 'A' type PP Units
- xxii. CHO/MPHEO in District Epidemic Cell
- xxiii. District Coordinators of 104 and 108 Services
- xxiv. Representatives of Registered Nursing Homes/Hospitals.

10. After the meeting scheme wise physical report has to be prepared and circulated to concerned officers. All officers have to verify at least 10% of their data in the field and to take follow up action. All Program officers should give supportive supervision in the field and it should not be fault finding supervision.

11. Action Taken Report has to be submitted to DM&HO in the Monthly review meeting by all program officers. DM&HO has to solve issues if any raised by program officers, and to submit a report to the state nodal officer.

12. MIS Nodal Officer at CHNC level: CHO will act as MIS Nodal officer at the CHNC level. He will be supported by LD Computer where ever available and by Data Entry Operator. Community Health Officer will collect reports from all PHCs in the CHNC area for all programs. At CHNC level the SPHO with the assistance of supporting staff will consolidate and analyze and upload the HMIS report and other reports to the district. The SPHO will have to send feedback report to all PHCs from his own observations and remarks sent from the district to take follow up action. Though CHO is the Nodal officer all supervisory officers at CHNC should take the responsibilities of collection and compilation of the data. This information should be available with all CHNC supervisory officers for presentation to any visiting officer in case even the concerned Nodal MIS officer is not available.

13. The reports have to be verified in the field by the concerned supervisory officer or as entrusted by the SPHO, record the findings and to be submitted to SPHO and to be discussed in the next meeting and improvements have to be recorded in the meeting.

14. 104 service providers shall attend the meeting and submit the reports and MCH tracking in particular. 108 service providers submit the Monthly report and vehicle functional status. SPHO has to review 104 &108 services performance & suggest corrective actions if any. SPHO has to entrust to the MPHEO for the collection of reports from private hospitals and to be included in the final report of CHNC.

15. Monthly review meeting at CHNC shall be attended by the following members:

- i. SPHO will preside over the meeting,
- ii. CHO –MIS Nodal Officer will convene the meeting,
- iii. MPHEO/Sub Unit Officer,
- iv. DPMO (Lep.),
- v. Ophthalmic Officer,
- vi. Health Education Officer, and
- vii. Medical Officers of PHC under that CHNC.

16. **MIS Nodal Officer at PHC level:** The CHO will act as MIS Nodal Officer at the PHC level. If the CHO is not available the PHC Medical Officer shall appoint one among MPHEO/PHN/HE as the Nodal officer based on seniority and efficiency. Nodal MIS officer will collect all reports and compile with the help of PHN, Pharmacist, MPHS (M&F), MPHA (M&F). Nodal MIS officer will discuss the report prepared and gaps identified with the Medical Officer in the presence of all PHC staff. MO and CHO shall suggest a corrective action plan for bridging the gaps identified. 10% of these reports have to be verified in the field for validity and to compare with the slandered estimations. This report has to be submitted to the PHC MO during the next monthly meeting. After having consensus on the report prepared, it will be submitted to the SPHO for onward transmission to district. Nodal MIS officer and other officers should cooperate with CHNC officers for field verification of the reports during their field visits.

17. **Sub-Centers Level: MPHA (F) and MPHA (M)** have to prepare their Monthly reports at the Sub Center under the supervision of MPHS (M&F). MPHS (M&F) should do field verification of these reports during the month. If any gaps are identified they should guide, support and correct the gaps identified in the field. MPHS (M&F) should take the responsibility of submitting these reports to Nodal MIS Officer of the PHC.

18. The Commissioner of Health and Family Welfare shall take further necessary action in the matter.

(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA PRADESH)

K.R.KISHORE
PRINCIPAL SECRETARY TO GOVERNMENT

To

The Commissioner of Health and Family Welfare
The Mission Director, NRHM
The Director of Public Health and Family Welfare
All District Collectors and District Magistrates
All District Medical and Health Officers
The District coordinators of Hospital Services

Copy to:

1. The Secretary to Government of India, Ministry of Health and Family Welfare, Nirman Bhavan, New Delhi
2. The Mission Director, NRHM, Nirman Bhavan, New Delhi.
3. The Director of Medical Education.
4. The Commissioner of AP Vaidya Vidhana Parishad

::5::

5. All Regional Directors of Health
6. All District Coordinator of Health Services (DCHS)
7. The OSD to Hon'ble Minster (Medical and Health), AP Secretariat, Hyderabad
8. The OSD to Special Chief Secretary to the Chief Minister
9. All Officers / Sections in HM&FW Dept.
10. Director, SPMU of HM &FW Department

//FORWARDED :: BY ORDER //

SECTION OFFICER